

PTO-1556  
(5/87)

Adjustment date: 01/10/2001 KHARLING  
12/04/2000 EFLDRES 00000016 09726244  
01 FC:108 -710.00 DP  
02 FC:103 -1404.00 DP  
03 FC:104 -270.00 DP

01/10/2001 KHARLING 00000014 09726244

01 FC:108 710.00 DP  
02 FC:109 80.00 DP  
03 FC:110 864.00 DP

Repln. Ref: 01/10/2001 KHARLING 0011550100  
DAH:133402 Name/Number:09726244  
FC: 704 \$460.00 CR

Repln. Ref: 01/10/2001 KHARLING 0011553600  
DAH:133402 Name/Number:09726244  
FC: 704 \$270.00 CR

12/04/2000 EFLDRES 00000016 09726244  
01 FC:108 710.00 DP  
02 FC:103 1404.00 DP  
03 FC:104 270.00 DP

U.S. DEPARTMENT OF COMMERCE  
PATENT AND TRADEMARK OFFICE  
FEE RECORD SHEET

PATENT APPLICATION SERIAL NO. \_\_\_\_\_

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

| REQUEST FOR PATENT FEE REFUND                         |                                   |   |                |
|---|-----------------------------------|---|----------------|
| 1 Date of Request: <u>1/9/01</u>                      |                                   | 2 Serial/Patent # <u>09/726244</u>                              |                |
| 3 Please refund the following fee(s):                 |                                   | 4 PAPER NUMBER  | 5 DATE FILED   |
| <input checked="" type="checkbox"/>                   | Filing                            |   | \$ <u>1730</u> |
| <input type="checkbox"/>                              | Amendment                         |   | \$             |
| <input type="checkbox"/>                              | Extension of Time                 |   | \$             |
| <input type="checkbox"/>                              | Notice of Appeal/Appeal           |   | \$             |
| <input type="checkbox"/>                              | Petition                          |   | \$             |
| <input type="checkbox"/>                              | Issue                             |   | \$             |
| <input type="checkbox"/>                              | Cert of Correction/Terminal Disc. |   | \$             |
| <input type="checkbox"/>                              | Maintenance                       |   | \$             |
| <input type="checkbox"/>                              | Assignment                        |   | \$             |
| <input type="checkbox"/>                              | Other                             |   | \$             |
|   |                                   | 7 TOTAL AMOUNT OF REFUND  | \$ <u>1730</u> |
| 10 REASON:  |                                   | 8 TO BE REFUNDED BY:  |                |
|   |                                   | <input checked="" type="checkbox"/> Treasury Check              |                |
|   |                                   | <input type="checkbox"/> Credit Deposit A/C #: <u>113--3402</u> |                |
| <input checked="" type="checkbox"/>                   | Overpayment                       |   |                |
| <input type="checkbox"/>                              | Duplicate Payment                 |   |                |
| <input type="checkbox"/>                              | No Fee Due (Explanation):         |   |                |
| 11 REFUND REQUESTED BY:                               |                                   |   |                |
| TYPED/PRINTED NAME: <u>Lorraine Rawls</u>             |                                   | TITLE: <u>Head LFE</u>  |                |
| SIGNATURE: <u>[Signature]</u>                         |                                   | PHONE: <u>308-9481</u>  |                |
| OFFICE: <u>OIFE</u>                                   |                                   |   |                |
| ***** THIS SPACE RESERVED FOR FINANCE USE ONLY: ***** |                                   |   |                |
| APPROVED: <u>[Signature]</u>                          |                                   | DATE: <u>1/10/01</u>  |                |

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: